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HICKMAN PALERMO TRUONG & BECKER, LLP 2055 GATEWAY PLACE SUITE 550				Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.			
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				(Date)			
APPLICATION NO. FILING DATE			FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.	
10/674,577 09/29/2003 Sa		ithyanarayana Nagendra Pu	cendra Puttu 50325-0797 5403				
TITLE OF INVENTION:	VERIFYING INFORM	IATION STORED ON A	MANAGED NETWORK	DEVICE			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1510	\$0	\$0	\$1510	07/14/2010	
EXAMINER A		ART UNIT	CLASS-SUBCLASS				
ANYA, CHARLES E		2194	719-318000				
Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. 1 Hickman Palermo Truor 2 & Becker LLP 3 3				
ASSIGNEE NAME AT	ND RESIDENCE DATA	A TO BE PRINTED ON	THE PATENT (print or typ	ne)			
			data will appear on the part a substitute for filing an	atent. If an assignee is in assignment.		ocument has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)							
Cisco Tec	hnology, Ir	nc.	San Jose,	California			
Please check the appropri	ate assignee category or	categories (will not be p	rinted on the patent):	Individual XX Corporat	ion or other private gro	up entity Government	
4a. The following fee(s) a Issue Fee Publication Fee (N Advance Order - #	o small entity discount		b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO=2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-1302 (enclose an extra copy of this form).				
	s SMALL ENTITY stat	us. See 37 CFR 1.27.	☐ b. Applicant is no lon				
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Authorized Signature	12 " "	ht Casi	vell_	Date 6	18/10		
	Deborah L	Registration No					
submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	ons for reducing this builting a 22313-1450. Doi: 13-1450.	e OSPTO. Time will varurden, should be sent to the order of NOT SEND FEES OR	on is required to obtain or 1.14. This collection is es y depending upon the individence Chief Information Office COMPLETED FORMS To espond to a collection of interpretation of interpretation of interpretation.	or, U.S. Patent and Trade O THIS ADDRESS. SEN	mark Office, U.S. Depa D TO: Commissioner i	artment of Commerce, P.O. for Patents, P.O. Box 1450,	
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